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|  | | | | **Indoor Nordic Masters Championships**  **10-12 March 2017**  **Storängshallen, Förrådsvägen 1, 141 46 Huddinge** | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | |
| **ANMÄLNINGSBLANKETT** | | | | | | | | | | **ENTRY FORM** | | | | | | | | | | | | | | **MUODOSSA** | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Efternamn/**Surname**/*Sukunimi*** | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | |
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| **Förnamn/**First name**/*Etunimi*** | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | |
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| **Land/**Country**/*Maa*** | | | | | | | |  | | | **DEN, FIN, ISL, NOR, SWE** | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | |
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| **Födelsedatum /Date of dte of birth/*Syntymävuosi*** | | | | | | | | dd-mm-yyyy | | | | | | | |  | |  | | | **Man/**Man**/*Miehet*** | | | | | | |  | | | |  | **Kvinna/**Women**/*Naiset*** | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Klubb/**Club**/*Seura*** | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | |
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|  | **X** | **Markera med X i de grenar du önskar delta i**  Please X-mark the events you will participate  ***Merkitse X mihin lajeihin haluat osallistua***  **Gren/Event/Laji** | | | | | | | | | | | | **Bästa resultat**  **Best result**  Parhaat tulokset  **2016-2017** | | | | | |  | | **By signing this Entry Form I declare that to the best of my knowledge and belief that I am in good health and that there is no objection against my participation in IVNM 2017 on medical reasons. I accept full responsibility in case of accident, injury or damage to myself or my property by me participation in the Indoor Nordic Master Championships in Huddinge 2017. I also give my consent to be subject to drug testing at IVNM 2017, if I should be selected to do so.** | | | | | | | | | | | | | | | | | | |
|  |  | **60 m** | | | | | | | | | | | |  | | | | | |  | |
|  |  | **200 m** | | | | | | | | | | | |  | | | | | |  | |
|  |  | **400 m** | | | | | | | | | | | |  | | | | | |  | |
|  |  | **800 m** | | | | | | | | | | | |  | | | | | |  | |
|  |  | **1500 m** | | | | | | | | | | | |  | | | | | |  | |
|  |  | **3000 m** | | | | | | | | | | | |  | | | | | |  | | **Date** | | | | | | | | | | | | | | | | | | |
|  |  | **60 m Häck/**Hurdles**/*Aidat*** | | | | | | | | | | | |  | | | | | |  | |
|  |  | **Höjd/**High Jump**/*Korkeus*** | | | | | | | | | | | |  | | | | | |  | | **Signature** | | | | | | | | | | | | | | | | | | |
|  |  | **Stav/**Pole Vault**/*Seiväs*** | | | | | | | | | | | |  | | | | | |  | |
|  |  | **Längd/**Long Jump**/*Pituus*** | | | | | | | | | | | |  | | | | | |  | |
|  |  | **Tresteg/**Triple Jump**/*Kolmiloikka*** | | | | | | | | | | | |  | | | | | |  | |  | |
|  |  | **Kula/**Shot put**/*Kuula*** | | | | | | | | | | | |  | | | | | |  | |  | | | | |  | | | | | | | | | | | | | |
|  |  | **Vikt/**Weight**/*Paino*** | | | | | | | | | | | |  | | | | | |  | |  | | | | |  | | | | | | | | | | | | | |
|  |  | **3000 m Gång Arena/**Track walk**/*Kävely areena*** | | | | | | | | | | | |  | | | | | |  | | **Closing date for entries:** | | | | | | | | | | | | | | | | | | |
|  |  |  | | | | | | | | | | | |  | | | | | |  | | **Friday 10 feb 2017** | | | | | | | | | | | | | | | | | | |
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|  |  | **Payment and address**  First event: **EUR 40** Next Events **EUR 20**/each  See then separate letter from each **national** veteran athletic association | | | | | | | | | | | |  | | | | | |  | | This form has to be posted or mailed to the **national** veteran athletic association and together with the entry fees.  [dorte@dansk-atletik.dk](mailto:dorte@dansk-atletik.dk)  Nordea Bank Reg. 2217 Knt. 8128213350 | | | | | | | | | | | | | | | | | | |
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|  |  |  | | | | | | | | | | | |  | | | | | |  | | **For the national Federations only** | | | | | | | | | | | | | | | | | | |
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|  |  |  | | | | | | | | | | | |  | | | | | |  | | **Date** | | | | | | | **Stamp or signature**  **The national Federation** | | | | | | | | | | | |
|  |  | | | | | |
|  | **OTHERS** | | | | | | | | | | | | | | | | | | |  | |  | | | | | | |  | | | | | | | | | | | |
|  |  | **Together Party EUR 25 (see separate info) Quantity** | | | | | | | | | | | |  | | | | | |  | |
|  |  | **T-shirt EUR 12 (see sep information) Size S to XXL** | | | | | | | | | | | |  | | | | | |  | |  | | | | | | | | | | | | | | | | | | |
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|  |  | **Gata/Street/*Tie*** | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | |
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|  | **Post Nr/City Code** | | | |  | | | | | | | **Ort/City** | | | |  | | | | | | | | | | | | | | | | | | | |  | | |
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|  |  | **Telephone** | | | |  | | | | | | | | | | | | | **Mobile** | | | | | |  | | | | | | | | | | |  | | |
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|  |  | | **E-mail** | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | |
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